

# **Suggestions for Laboratories**

National Kidney Disease Education Program

## **MDRD EQUATION**

In adults, the best equation for estimating glomerular filtration rate (GFR) from serum creatinine is the MDRD equation.<sup>1,2</sup>

GFR (ml/min/1.73m<sup>2</sup>) = 186 x ( $P_{cr}$ )<sup>-1.154</sup> x (Age)<sup>-0.203</sup> x (0.742 if female) x (1.210 if African American)

The equation requires 4 variables:

Serum creatinine
Age
Sex
African American or not

Since a patient's race is often not available to clinical laboratories, a good alternative is to report estimated GFR values for both African Americans and non-African Americans (see Sample Reports below). Note that the equation does not require weight because the result is reported normalized to  $1.73 \, \mathrm{m}^2$  body surface area, which is an accepted average adult surface area. If your printing system does not allow for superscripts, we recommend reporting ml/min/1.73 square meters.

#### **REPORTING VALUES**

We presently recommend reporting values above 60 ml/min/1.73m<sup>2</sup> merely as "above 60 ml/min/1.73m<sup>2</sup>" not as an exact number such as 92 ml/min/1.73m<sup>2</sup>. For values below 60 ml/min/1.73m<sup>2</sup>, the report should give the numerical estimate such as "32 ml/min/1.73m<sup>2</sup>" (see Sample Reports below).

#### There are 3 reasons for this recommendation:

- 1. The equation has been most extensively evaluated in people with some degree of renal insufficiency.
- 2. Inter-laboratory differences in calibration of the creatinine assay have their greatest impact in the near normal range and therefore lead to greater inaccuracies.<sup>3</sup>
- 3. Quantification of GFR below 60 ml/min/1.73m<sup>2</sup> has more clinical implications than above that level.

## **SAMPLE REPORTS**

### Sample report for a 55-year old man

Creatinine = 1.1 mg/dl

Glomerular filtration rate (GFR) estimate greater than 60 ml/min/1.73m<sup>2</sup>

Average GFR for 50-59 years old = 93 ml/min/1.73m<sup>2</sup> Chronic Kidney Disease less than 60 ml/min/1.73m<sup>2</sup> Kidney failure less than 15 ml/min/1.73m<sup>2</sup>

### Sample report for 63-year old woman

Creatinine = 1.8 mg/dl

Glomerular filtration rate (GFR) estimate = 30 ml/min/1.73m<sup>2</sup> if non-African American Glomerular filtration rate (GFR) estimate = 37 ml/min/1.73m<sup>2</sup> if African American

Average GFR for 60-69 years old = 85 ml/min/1.73m<sup>2</sup> Chronic Kidney Disease less than 60 ml/min/1.73m<sup>2</sup> Kidney failure less than 15 ml/min/1.73m<sup>2</sup>

#### Sample report for 62-year old man

Creatinine = 1.4 mg/dl

Glomerular filtration rate (GFR) estimate = 55 ml/min/1.73m<sup>2</sup> if non-African American Glomerular filtration rate (GFR) estimate greater than 60 ml/min/1.73m<sup>2</sup> if African American

Average GFR for 60-69 years old = 85 ml/min/1.73m<sup>2</sup> Chronic Kidney Disease less than 60 ml/min/1.73m<sup>2</sup> Kidney failure less than 15 ml/min/1.73m<sup>2</sup>

# REFERENCE TABLE FOR POPULATION MEAN GFRs FROM NHANES III4

AGE (years)	AVERAGE GFR
20-29	116 ml/min/1.73m <sup>2</sup>
30-39	107 ml/min/1.73m <sup>2</sup>
40-49	99 ml/min/1.73m <sup>2</sup>
50-59	93 ml/min/1.73m <sup>2</sup>
60-69	85 ml/min/1.73m <sup>2</sup>
70+	75 ml/min/1.73m <sup>2</sup>

#### THE FUTURE

This approach provides the best means currently available of providing more accurate interpretation of the serum creatinine as renal function (GFR) and even appears better than 24-hour urine collections. However, efforts are underway to validate the equation in more diverse populations including Hispanics, people with diabetes, and people with normal renal function.

The inter-laboratory variation in the creatinine assay's calibration is being addressed by a Laboratory Working Group of the NKDEP (www.nkdep.nih.gov).<sup>5</sup> The Laboratory Working Group is developing a program to standardize and improve serum creatinine measurements that will allow for accurate estimations of GFR in the range greater than 60 ml/min/1.73m<sup>2</sup> and in children by all clinical laboratories.

#### **CONTACT INFORMATION**

For assistance, please contact Tom Hostetter at 301-594-8864 or Elisa Gladstone at 301-435-8116 with the National Kidney Disease Education Program.

#### **REFERENCES**

- 1. Levey AS, Coresh J, Balk E, et al. National Kidney Foundation practice guidelines for chronic kidney disease: evaluation, classification, and stratification. *Ann Intern Med* 2003; 139:137-47.
- 2. Manjunath G, Sarnak MJ, Levey AS. Prediction equations to estimate glomerular filtration rate: an update. *Curr Opin Nephrol Hypertens* 2001; 10:785-92.
- 3. Coresh J, Astor BC, McQuillan G, et al. Calibration and random variation of the serum creatinine assay as critical elements of using equations to estimate glomerular filtration rate. *Am J Kidney Dis* 2002; 39:920-9.
- 4. Coresh J, Astor BC, Greene T, Eknoyan G, Levey AS. Prevalence of chronic kidney disease and decreased kidney function in the adult US population: Third National Health and Nutrition Examination Survey. *Am J Kidney Dis*. 2003; 41:1-12.
- 5. National Kidney Disease Education Program. Meeting on Creatinine Assay and Reporting of Estimated GFR 2003. http://www.nkdep.nih.gov.